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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Christopher First name H Middle name Forson Last name and Suffix (Sr., Jr., II, III)	- - -	Jean First name A Middle name Forson Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.			Jean A Faught Jean A Kienzle
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8984		xxx-xx-1549

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Debtor 1 Christopher H Forson Debtor 2 Jean A Forson

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)			
		EINS	EINs			
5.	Where you live	304 Lincoln Avenue	If Debtor 2 lives at a different address:			
		Pleasantville, OH 43148 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Fairfield				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6. Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.)		 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. 	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Christopher H Forson Debtor 1 Debtor 2 Jean A Forson Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? □ Yes.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

No. Go to line 12.

bankruptcy petition.

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Deb	otor 2 Jean A Forson			Case number (if known)		
Par	Report About Any Ru	ısinesses	You Own as a Sole Proprie	tor		
			100 0 111 00 0 0010 1 100110			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
		☐ Yes.	Name and location of bus	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one sole proprietorship, use a		Number, Street, City, State & ZIP Code			
	separate sheet and attach it to this petition.		Check the appropriate bo	ox to describe your business:		
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))		
			☐ Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))		
			☐ Stockbroker (as o	lefined in 11 U.S.C. § 101(53A))		
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
			☐ None of the above	e		
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor. If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent balance s operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, for in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement of		
	For a definition of small	■ No.	I am not filing under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Dos	Depart if You Own or	Have An	, Hamardana Dramarin ay Aw	Dramastis That Needa Immediate Attention		
Par	<u> </u>		nazardous Property of An	y Property That Needs Immediate Attention		
14.	Do you own or have any property that poses or is	■ No.				
	alleged to pose a threat	☐ Yes.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
	of imminent and identifiable hazard to public health or safety?		What is the hazard?			
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
				Number, Street, City, State & Zip Code		

Debtor 1 Christopher H Forson

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Debtor 1 Christopher H Forson
Debtor 2 Jean A Forson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 2:16-bk-51913 Doc 1 Filed 03/24/16 Entered 03/24/16 19:34:27 Desc Main Document Page 6 of 70

Christopher H Forson Debtor 1 Debtor 2 Jean A Forson Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Christopher H Forson /s/ Jean A Forson **Christopher H Forson** Jean A Forson Signature of Debtor 1 Signature of Debtor 2 Executed on March 24, 2016 Executed on March 24, 2016 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Christopher H Forson
Debtor 2 Jean A Forson

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Wendi	Henderhan	Date	March 24, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Wendi Hei	nderhan		
Printed name			
	Henderhan, Attorney at Law		
Firm name			
6649 N. Hi	gh St.		
Suite 106			
Worthingt	on, OH 43085		
	City, State & ZIP Code		
Contact phone	614-738-9695	Email address	WHenderhanLaw@Gmail.com
0078734			
Bar number & S	tate		

Certificate Number: 15725-OHS-CC-027057096



CERTIFICATE OF COUNSELING

I CERTIFY that on March 4, 2016, at 2:07 o'clock PM EST, Christopher Forson received from 001 Debtorce, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Southern District of Ohio, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 4, 2016

By: /s/Landes Thomas

Name: Landes Thomas

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 15725-OHS-CC-027057097



CERTIFICATE OF COUNSELING

I CERTIFY that on March 4, 2016, at 2:07 o'clock PM EST, Jean Forson received from 001 Debtorcc, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Southern District of Ohio, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 4, 2016 By: /s/Landes Thomas

Name: Landes Thomas

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

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		Docume	ent Page 10 of 7	0	
Fill in this inforn	nation to identify your	case:			
Debtor 1	Christopher H Fo	rson			
	First Name	Middle Name	Last Name		
Debtor 2	Jean A Forson				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number					☐ Check if this is an amended filing
					amondou ming

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. **The Summarize Your Assets		
Par	Summarize Your Assets	Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	100,920.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	117,402.59
	1c. Copy line 63, Total of all property on Schedule A/B	\$	218,322.59
Par	t 2: Summarize Your Liabilities		
			i abilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	246,842.73
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	69,914.97
	Your total liabilities	\$	316,757.70
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,213.39
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,690.68
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Christopher H Forson
Debtor 2 Jean A Forson

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

12,907.85

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	24,674.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	24,674.00

	Case	2:16-0K-51	913 Doc 1	FII6 Doc)3/24/10 ent [o Entere Page 12 d		4/16 19:	34:27	Des	sc Main
Fill	in this inform	ation to identify	your case and th			1.111	7000	7. 7.7				
Deb	otor 1	Christopher	H Forson									
		First Name		Name		L	Last Name					
Deb	otor 2	Jean A Fors	on									
(Spo	use, if filing)	First Name	Middle	Name		L	Last Name					
Unit	ted States Ban	kruptcy Court for	the: SOUTHER	N DIST	RICT	OF OHIO						
Cas	se number											Check if this is an amended filing
Sc	hedule	m 106A/E A/B: P i	roperty									12/15
hink nfor	it fits best. Be	as complete and space is needed,	lescribe items. List a accurate as possibl attach a separate sl	e. If two	marri	ied people a	re filing togeth	er, both are	equally resp	onsible for su	ıpplyi	ng correct
Part	1: Describe E	ach Residence, B	uilding, Land, or Ot	her Real	l Estat	te You Own	or Have an Inte	erest In				
D	o vou own or ha	ave any legal or eg	quitable interest in a	nv resid	lence	huilding la	ınd or similar ı	oronerty?				
			,	,	,	,	, 0. 0	оролу .				
L	No. Go to Part	2.										
	Yes. Where is	the property?										
1.1				What	t is the	e property?	Check all that app	ly				
	304 Lincoli	n Avenue			Sing	gle-family hor	me		Do not dec	uct secured cl	aims o	or exemptions. Put
	Street address, if	available, or other des	scription	П	Dup	olex or multi-u	unit building					ms on Schedule D:
					Con	ndominium or	cooperative		Creditors V	vno Have Ciai	ms se	ecured by Property.
				П	l Man	nufactured or	mobile home					
	Pleasantvil	lle OH	43148-0000	_					Current va			rrent value of the rtion you own?
	City	State	ZIP Code			estment prope	ertv		• .	79,000.00	PO	\$79,000.00
	- ,					eshare	0.1,				_	. ,
					Othe	er						wnership interest by the entireties, or
				Who	has a	ın interest in	the property?	Check one		e), if known.	-	
					Deb	otor 1 only			Fee sim	ple		
	Fairfield				Deb	otor 2 only						
	County				Deb	otor 1 and De	ebtor 2 only		- Chec	c if this is con	nmun	ity property
					At le	east one of th	ne debtors and a	another		structions)	iiiiuii	ity property
						-	wish to add al	oout this iter	n, such as lo	cal		
				nron	orty id	dentification	number:					

Official Form 106A/B Schedule A/B: Property page 1

2 parcels lot 68 and 69; value listed is total

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$\frac{\text{Surrent value of the portion you own?}}{\text{\$\frac{\text{\$\text{\$21,920.00}}{\text{\$\text{\$000}}}}}\$\$ Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known. Fee simple
Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$21,920.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.
the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$21,920.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.
Current value of the entire property? Current value of the portion you own? \$21,920.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.
Current value of the entire property? Current value of the portion you own? \$21,920.00 \$21,920.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.
entire property? portion you own? \$21,920.00 \$21,920.0 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.
entire property? portion you own? \$21,920.00 \$21,920.0 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.
Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.
Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.
(such as fee simple, tenancy by the entireties, a life estate), if known.
Check one a life estate), if known.
Fee simple
— Chook if this is somewhite areas
nother Check if this is community property (see instructions)
out this item, such as local
e registered or not? Include any vehicles you own that sts and Unexpired Leases.
one Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D.
Creditors Who Have Claims Secured by Property.
Comment value of the
Current value of the Current value of the
Current value of the current value of the entire property? portion you own?
entire property? portion you own?
entire property? portion you own?
sentire property? portion you own? \$21,077.00 \$21,077.0 Do not deduct secured claims or exemptions. Put
entire property? portion you own? \$21,077.00 \$21,077.0 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D.
one Do not deduct secured claims or exemptions. Put the amount of any secured claims or Schedule D. Creditors Who Have Claims Secured by Property.
entire property? portion you own? \$21,077.00 \$21,077.00 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property. Current value of the Current value of the
entire property? portion you own? \$21,077.00 \$21,077.00 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property. Current value of the Current value of the
e e

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Case 2:16-bk-51913 Do	oc 1 Filed 03/24/16 Entered 03 Document Page 14 of 70	/24/16 19:34:27	Desc Main
Debtor 2	Jean A Forson	C	ase number (if known)	
3.3 Make	F	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any secu	claims or exemptions. Put red claims on Schedule D: aims Secured by Property.
	coximate mileage: 40,000 or information:	□ Debtor 2 only■ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	ation: 304 Lincoln Avenue, asantville OH 43148	☐ Check if this is community property (see instructions)	\$31,000.00	\$31,000.00
■ No □ Yes 5 Add the	e dollar value of the portion you ov	atercraft, fishing vessels, snowmobiles, motorcycle and the second secon	ny entries for	\$58,482.00
.pages y	ou have attached for Fart 2. Write	That number nere		
	scribe Your Personal and Household I In or have any legal or equitable in	tems nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Example ☐ No	old goods and furnishings es: Major appliances, furniture, linens Describe	s, china, kitchenware		
		arge appliances Lincoln Avenue, Pleasantville OH 43148		\$5,023.00
		deo, stereo, and digital equipment; computers, printe media players, games	ers, scanners; music collec	tions; electronic devices
■ No □ Yes.	Describe			
Example ■ No	other collections, memorabilia, co	, prints, or other artwork; books, pictures, or other ar ollectibles	t objects; stamp, coin, or b	paseball card collections;
☐ Yes.	Describe			
	ent for sports and hobbies es: Sports, photographic, exercise, a musical instruments	and other hobby equipment; bicycles, pool tables, go	If clubs, skis; canoes and	kayaks; carpentry tools;
	Describe			
■ No	ns les: Pistols, rifles, shotguns, ammun Describe	nition, and related equipment		

Official Form 106A/B Schedule A/B: Property page 3

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

11. Clothes

■ Yes. Describe.....

Debtor 2	Jean A Forson		Case number (if know	vn)
		lothing and bedding ocation: 304 Lincoln	Avenue, Pleasantville OH 43148	\$2,996.00
■ No		y, costume jewelry, enga	gement rings, wedding rings, heirloom jewelry, watches, geme	s, gold, silver
Exam	arm animals uples: Dogs, cats, birds	s, horses		
	3	large domestic dogs	; 27 chickens	\$0.00
■ No □ Yes.	. Give specific information the dollar value of a	ation Il of your entries from P	not already list, including any health aids you did not list Part 3, including any entries for pages you have attached	\$8,019.00
	escribe Your Financial <i>i</i> wn or have any legal	Assets I or equitable interest in	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No		e in your wallet, in your ho	ome, in a safe deposit box, and on hand when you file your pe	etition
			Cash	\$12.00
Exam	institutions. If yo		ounts; certificates of deposit; shares in credit unions, brokerages with the same institution, list each. Institution name: PNC Bank Checking Account XXX4247	ge houses, and other similar
	1	7.2. Checking	BMI Federal Credit Union Acct: xxxx691	\$5.00
Exam No Yes. 19. Non-p joint	oples: Bond funds, inve	Institution or issuer and interests in incorpo	orated and unincorporated businesses, including an inte	rest in an LLC, partnership, and
⊔ Yes.	. Give specific informa	ation about them Name of entity:	% of ownership:	

	ebtor 1 ebtor 2	Christopher H Forson Jean A Forson	Case number (if known)	
20.	Negoti	iable instruments include personal checks,	negotiable and non-negotiable instruments , cashiers' checks, promissory notes, and money orders. ot transfer to someone by signing or delivering them.	
	■ No			
	☐ Yes.	Give specific information about them		
		Issuer name:		
		ment or pension accounts oles: Interests in IRA, ERISA, Keogh, 401((k), 403(b), thrift savings accounts, or other pension or profit-sharing plan	s
	■ Yes.	List each account separately. Type of account:	Institution name:	
		401(k)	Merrill Lynch BLE 401K	
			CSX Transportation	
			Location: 304 Lincoln Avenue, Pleasantville	
			OH 43148	\$50,231.59
<i>2</i> 2.	Your s Examp ■ No		de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications companies, Institution name or individual:	or others
23.	Annuit ■ No	ies (A contract for a periodic payment of n	money to you, either for life or for a number of years)	
	Yes	Issuer name and description	on.	
24.		ts in an education IRA, in an account in C. §§ 530(b)(1), 529A(b), and 529(b)(1).	n a qualified ABLE program, or under a qualified state tuition progra	m.
	☐ Yes	Institution name and descri	iption. Separately file the records of any interests.11 U.S.C. § 521(c):	
	Trusts	, equitable or future interests in propert	ty (other than anything listed in line 1), and rights or powers exercis	able for your benefit
	☐ Yes.	Give specific information about them		
	Exam _l ■ No	s, copyrights, trademarks, trade secrets ples: Internet domain names, websites, pro-	s, and other intellectual property occeds from royalties and licensing agreements	
27.		es, franchises, and other general intangoles: Building permits, exclusive licenses, of	cooperative association holdings, liquor licenses, professional licenses	
	☐ Yes.	Give specific information about them		
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	funds owed to you		
	☐ Yes.	Give specific information about them, inclu	uding whether you already filed the returns and the tax years	
29.		r support ples: Past due or lump sum alimony, spous	sal support, child support, maintenance, divorce settlement, property sett	lement
		Give specific information		

Schedule A/B: Property

Official Form 106A/B

	tor 1 tor 2	Christopher H Forson Jean A Forson	Dogamoni	Case number (if known)	
		amounts someone owes you oles: Unpaid wages, disability insura benefits; unpaid loans you mad		nefits, sick pay, vacation pay, workers' compe	nsation, Social Security
	No				
	Yes.	Give specific information			
_	Examp	ts in insurance policies bles: Health, disability, or life insuran	nce; health savings account	(HSA); credit, homeowner's, or renter's insurar	nce
	■ No	N. d. i	1 8 18 49		
L	J Yes. I	Name the insurance company of ea Company nar		Beneficiary:	Surrender or refund value:
_	If you a someo	terest in property that is due you that the beneficiary of a living trust, enter has died.		ied nsurance policy, or are currently entitled to reco	eive property because
_	No	Ohan ann aiffe information			
L	J Yes.	Give specific information			
_		against third parties, whether or oles: Accidents, employment dispute		uit or made a demand for payment ts to sue	
		Describe each claim			
					and off alabase
	Otner d INo	contingent and unliquidated claim	is of every nature, includi	ng counterclaims of the debtor and rights to	set off claims
_	_	Describe each claim			
_	Any fin I _{No}	nancial assets you did not already	list		
_		Give specific information			
36.		he dollar value of all of your entri art 4. Write that number here		any entries for pages you have attached	\$50,901.59
Part	5: Des	scribe Any Business-Related Property	You Own or Have an Interes	In. List any real estate in Part 1.	
37. D	o you o	own or have any legal or equitable inte	erest in any business-related	property?	
	No. Go	to Part 6.			
	Yes. G	Go to line 38.			
Part		scribe Any Farm- and Commercial Fisl ou own or have an interest in farmland, li		wn or Have an Interest In.	
	_ `		ole interest in any farm- or	commercial fishing-related property?	
	No.	Go to Part 7.			
	☐ Yes.	. Go to line 47.			
Part	7:	Describe All Property You Own or H	lave an Interest in That You D	id Not List Above	
_		have other property of any kind to bles: Season tickets, country club mo			
_		Give specific information			
54.	Add t	he dollar value of all of your entri	es from Part 7. Write that	number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 6

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Debtor 1 Christopher H Forson Document Page 18 of 70

Debtor 2 Jean A Forson Case number (if known)

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$100,920.00
56.	Part 2: Total vehicles, line 5	\$58,482.00	_	
57.	Part 3: Total personal and household items, line 15	\$8,019.00		
58.	Part 4: Total financial assets, line 36	\$50,901.59		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$117,402.59	Copy personal property total	\$117,402.59
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$218,322.59

Official Form 106A/B Schedule A/B: Property page 7

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Fill in this infor	mation to identify your	case:		
Debtor 1	Christopher H Fo	rson		
	First Name	Middle Name	Last Name	
Debtor 2	Jean A Forson			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number (if known)				☐ Check if this is a
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Cla	aim as Exempt
---------------------------------------	---------------

1.	Which set of exemptions are you claiming	Check one only	even if you	ur spouse is	filing with :	you.
----	--	----------------	-------------	--------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
	Copy the value from Check only one box for each exemption. Schedule A/B				
304 Lincoln Avenue Pleasantville, OH 43148 Fairfield County	\$79,000.00		\$1.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
2 parcels lot 68 and 69; value listed is total Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020.00(.1)(.1)	
2010 Honda Civic 48,000 miles Location: 304 Lincoln Avenue,	\$6,405.00		\$1,441.64	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Pleasantville OH 43148 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit		
Furniture and large appliances Location: 304 Lincoln Avenue,	\$5,023.00		\$5,023.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Pleasantville OH 43148 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2020.00(17)(4)(4)	
Clothing and bedding Location: 304 Lincoln Avenue,	\$2,996.00		\$2,996.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Pleasantville OH 43148 Line from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(4)(a)	
Cash Line from Schedule A/B: 16.1	\$12.00		\$12.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
			100% of fair market value, up to any applicable statutory limit		

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Christopher H Forson

Jean A Forson Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Specific laws that allow exemption Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: PNC Bank** Ohio Rev. Code Ann. § \$653.00 \$653.00 **Checking Account XXX4247** 2329.66(A)(18) 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit 401(k): Merrill Lynch Ohio Rev. Code Ann. § \$50,231.59 \$50,231.59 **BLE 401K** 2329.66(A)(10)(c) **CSX Transportation** 100% of fair market value, up to Location: 304 Lincoln Avenue, any applicable statutory limit Pleasantville OH 43148 Line from Schedule A/B: 21.1 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

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		Document Pa	ide 21	OT 70		
Fill in this information to ide	entify your	case:				
	pher H Fo					
First Name		Middle Name Last	Name			
Debtor 2 (Spouse if, filing) Jean A I First Name	Forson	Middle Name Last	Name			
(Spoude II, IIIIIg)			14dillo			
United States Bankruptcy Cou	urt for the:	SOUTHERN DISTRICT OF OHIO				
Case number						
(if known)					☐ Check	if this is an
					ameno	led filing
Official Form 106D						
Schedule D: Cred	ditors	Who Have Claims Sec	cured	by Propert	у	12/15
		two married people are filing together, bo it, number the entries, and attach it to this				
1. Do any creditors have claims s	secured by v	your property?				
_ •		s form to the court with your other sche	dulas Voi	u have nothing else t	a report on this form	
_		,	uules. 100	u nave nothing else t	o report on this form.	
Yes. Fill in all of the info	ormation be	elow.				
Part 1: List All Secured C	laims			0.1	0.1.	0.1.0
		ore than one secured claim, list the creditor s		Column A	Column B	Column C
		particular claim, list the other creditors in Pa Il order according to the creditor's name.	art 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	- a.p.i.a.botioa	or do. docordaing to the croation of hame.		value of collateral.	claim	if any
2.1 GM Financial		Describe the property that secures the cla	aim: _	\$41,944.86	\$31,000.00	\$10,944.86
Creditor's Name	I	2013 LandRover Evoque 40,000				
		miles Location: 304 Lincoln Avenue,				
	I	Pleasantville OH 43148				
P.O. Box 183834		As of the date you file, the claim is: Check	all that			
Arlington, TX 76096-	2024	apply.				
Number, Street, City, State & Zip		☐ Contingent ☐ Unliquidated				
Number, Street, Oily, State & Zip		☐ Disputed				
Who owes the debt? Check one		Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as mortga	age or secu	red		
Debtor 2 only		car loan)	.go 0, 000u			
■ Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic	's lien)			
☐ At least one of the debtors and	another	☐ Judgment lien from a lawsuit				
\square Check if this claim relates to	а	Other (including a right to offset)				
community debt						
Date debt was incurred 8/201	15	Last 4 digits of account number	4593			
2.2 Honda Financial Ser	vices	Describe the property that secures the cla	aim:	\$4,963.36	\$6,405.00	\$0.00
Creditor's Name		2010 Honda Civic 48,000 miles				
		Location: 304 Lincoln Avenue,				
		Pleasantville OH 43148				
P.O. Box 5308		As of the date you file, the claim is: Check apply.	all that			
Elgin, IL 60121-5308		Contingent				
Number, Street, City, State & Zip	Code	☐ Unliquidated				
NATI		Disputed				
Who owes the debt? Check on		Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortga	age or secu	red		
Debtor 2 only		car loan)	1. 12			
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic	s lien)			
At least one of the debtors and		Judgment lien from a lawsuit				
☐ Check if this claim relates to	a	Other (including a right to offset)				

community debt

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Debtor 1 Christopher H Forson		Case number (if know)		
First Name Middle N	lame Last Name			
Debtor 2 Jean A Forson First Name Middle N	lame Last Name			
Date debt was incurred 11/19/2010	Last 4 digits of account number	3666		
2.3 Huntington National	Describe the property that secures the cl	aim: \$69,978.43	\$21,920.00	\$48,058.43
Creditor's Name	49 Norwood Logan, OH 43138			
	Hocking County			
P.O. Box 1558	As of the date you file, the claim is: Check	all that		
Columbus, OH 43216	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Number, offeet, only, office & Zip code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortg car loan)	age or secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	rtgage		
Date debt was incurred 8/27/13	Last 4 digits of account number	6261		
2.4 Nationstar Mortgage	Describe the property that secures the cl	aim: \$104,620.00	\$79,000.00	\$25,620.00
Creditor's Name	304 Lincoln Avenue Pleasantvill	e,		
	OH 43148 Fairfield County			
	2 parcels lot 68 and 69; value lis	sted		
	is total			
P.O. Box 829009	As of the date you file, the claim is: Check apply.	t all that		
Dallas, TX 75382-9009	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who awas the debt? Ohada are	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortg car loan)	age or secured		
Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	o'a lian)		
Debtor 1 and Debtor 2 only		cs liett)		
At least one of the debtors and another Check if this claim relates to a	☐ Judgment lien from a lawsuit	rtgage		
community debt	Other (including a right to offset)	rigage		
Date debt was incurred 2/20/2009	Last 4 digits of account number	6307		
Wells Fargo Dealer		*	404.000	44.050.00
Services	Describe the property that secures the cl	aim: \$25,336.08	\$21,077.00	\$4,259.08
Creditor's Name	2006 Dodge Ram 170,000 miles			
	Location: 304 Lincoln Avenue, Pleasantville OH 43148			
D.O. Day 05044	As of the date you file, the claim is: Check	all that		
P.O. Box 25341 Santa Ana, CA 92799	apply.			
· · · · · · · · · · · · · · · · · · ·	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortg	ago or socured		
Debtor 2 only	car loan)	aye or secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	•		

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			L	ocument r	aye 23 U	70	
Debto	1 Christoph				Case	e number (if know)	
Dobto	First Name	Middle Nam	ne	Last Name			
Debioi	T2 Jean A Fo First Name	Middle Nam	ne	Last Name			
	eck if this claim re mmunity debt	elates to a	Other (including	ng a right to offset)			
Date de	ebt was incurred	12/10/2014	Last 4 dig	its of account number	3109		
Add 1	the dollar value of	f vour entries in Col	umn A on this pa	age. Write that number	r here:	\$246,842.73	
If this		of your form, add th	•	-		\$246,842.73	
Part 2	List Others t	o Be Notified for	a Debt That Yo	u Already Listed			
Use thi trying t than or debts i	s page only if you to collect from you	u have others to be u for a debt you ow	notified about yo e to someone els ou listed in Part	our bankruptcy for a do se, list the creditor in F	Part 1, and then li	ady listed in Part 1. For example, if a collection agen ist the collection agency here. Similarly, if you have ou do not have additional persons to be notified for	more
		reet, City, State & Zip			On which line	e in Part 1 did you enter the creditor? 2.4	
	224 E. Main S P.O. Box 370 Lancaster, Ol	- Clerk of Court	:s		Last 4 digits	of account number	
						e in Part 1 did you enter the creditor?	
	Name, Number, St Hocking Cour P.O. Box 28 Logan, OH 43		o Code			e in Part 1 did you enter the creditor? 2.3 of account number 0022	
	Name, Number, St Huntington N 2361 Morse R Columbus, Ol	d.	o Code			e in Part 1 did you enter the creditor? 2.3 of account number 0022	
						e in Part 1 did you enter the creditor?	
						e in Part 1 did you enter the creditor?	

Solon, OH 44139

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Ous	5 2.10 DK 01010	Docume	ent Page 24 of 70	10.04.27	COO MAIN
Fill in this infor	mation to identify your c		· · · · · · · · · · · · · · · · · · ·		
Debtor 1	Christopher H For	son			
Dobto. 1	First Name	Middle Name	Last Name	_	
Debtor 2	Jean A Forson				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	_	
Case number					
(if known)					heck if this is an mended filing
					nonaca ming
Official For					
Schedule I	E/F: Creditors W	<u>ho Have Unsecu</u>	ured Claims		12/15
Schedule D: Credi left. Attach the Co name and case nu	itors Who Have Claims Secuntinuation Page to this page imber (if known).	red by Property. If more specified by Property. If you have no information	06G). Do not include any creditors with par pace is needed, copy the Part you need, fill on to report in a Part, do not file that Part. O	it out, number the ent	ries in the boxes on the
	All of Your PRIORITY Uns				
_	tors have priority unsecured	ciaims against you?			
No. Go to	Part 2.				
Yes.	NII of Vour MONDDIODIT	/ Unaccured Claims			
	All of Your NONPRIORIT				
	tors have nonpriority unsec				
☐ No. You ha	ave nothing to report in this pa	ort. Submit this form to the co	urt with your other schedules.		
Yes.					
unsecured cla	im, list the creditor separately	for each claim. For each cla	ler of the creditor who holds each claim. If a im listed, identify what type of claim it is. Do not sold you have more than three nonpriority unsections.	t list claims already incl	luded in Part 1. If more
					Total claim
4.1 195		Last 4 digits	s of account number 7579		\$1,950.00
•	ty Creditor's Name West Street	When was t	he debt incurred?		. ,
	gton, DE 19801				
	Street City State Zlp Code urred the debt? Check one.	As of the da	te you file, the claim is: Check all that apply		
Debto		П			
☐ Debto	· ·	☐ Continge			
_	•	☐ Unliquida			
■ Debto	or 1 and Debtor 2 only	☐ Disputed			
_	st one of the debtors and ano		NPRIORITY unsecured claim:		
☐ Chec debt	k if this claim is for a comm			one about the state of the stat	
	aim subject to offset?	☐ Obligation report as price	ns arising out of a separation agreement or div ority claims	vorce that you did not	
■ No		Debts to	pension or profit-sharing plans, and other simi	lar debts	
□Yes		Other St	ocify Credit Card Purchases		

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	1 Christopher H Forson 2 Jean A Forson	Case number (if know)	
4.2	BMI Federal Credit Union	Last 4 digits of account number 7691	\$2,400.00
	Nonpriority Creditor's Name 6165 Emerald Parkway P.O. Box 3670	When was the debt incurred?	
	Dublin, OH 43016 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.3	Capital Endocrinology	Last 4 digits of account number 270	\$35.00
	Nonpriority Creditor's Name 4882 E Main St #210	When was the debt incurred?	
	Columbus, OH 43213	_	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections on Medical debt	
4.4	Capital One Nonpriority Creditor's Name	Last 4 digits of account number 9808	\$611.67
	P O Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	
•	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	

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	1 Christopher H Forson 2 Jean A Forson	Case number (if know)	
4.5	Capital One	Last 4 digits of account number 3223	\$1,316.30
	Nonpriority Creditor's Name PO Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.6	Capital One Nonpriority Creditor's Name	Last 4 digits of account number 5538	\$500.00
	PO Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.7	Capital One Nonpriority Creditor's Name	Last 4 digits of account number 0766	\$4,650.00
	PO Box 30253 Salt Lake City, UT 84130	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	

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Debtor 2	Christopher H Forson Jean A Forson	Case number (if know)	
	Comenity Bank/ElderBeerman	Last 4 digits of account number 0781	\$224.00
	Nonpriority Creditor's Name 3100 Easton Square Place Columbus, OH 43219	When was the debt incurred?	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number 6802	\$725.00
	P.O. Box 98873 Las Vegas, NV 89193-8872	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	П	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.1	Credit One Bank	Last 4 digits of account number 2787	\$2,400.00
	Nonpriority Creditor's Name P.O. Box 98873	When was the debt incurred?	
-	Las Vegas, NV 89193-8872 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card Purchases	

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Debtor Debtor	Christopher H Forson Jean A Forson		Case number (if know)	
	Fairfield Insulation & Drywall	Last 4 digits of account number	0836	\$1,050.00
	Nonpriority Creditor's Name 1655 Election House Rd Lancaster, OH 43130	When was the debt incurred?	5/2012	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Collections	s Account	
4.1	First National Bank	Last 4 digits of account number	0302	\$550.00
	Nonpriority Creditor's Name 500 E. 60th Street N	When was the debt incurred?		
	Sioux Falls, SD 57104 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,	,	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	d Purchases	
4.1	Great Lakes Higher Education	Last 4 digits of account number	6879	\$24,674.00
	Nonpriority Creditor's Name PO Box 7860 Madison, WI 53707	When was the debt incurred?	11/2012	
-	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and the same and t	
	No	☐ Debts to pension or profit-sharin	ig pians, and other similar debts	
	Yes	Other. Specify		
		Student Lo	oan	

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Jean A Forson		Case number (if know)	
Kohl's	Last 4 digits of account number	8690	\$635.0
Nonpriority Creditor's Name P.O. Box 3115	When was the debt incurred?		
Milwaukee, WI 53201-3115 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separ	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	Purchases	
Onemain	Last 4 digits of account number	1534	\$17,950.0
Nonpriority Creditor's Name 6801 Colwell Blvd	When was the debt incurred?	3/2015	•
Irving, TX 75039 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separ	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Unsecured	Loan	
PayPal Credit	Last 4 digits of account number	7774	\$1,255.0
Nonpriority Creditor's Name P O Box 5138 Lutherville Timonium, MD 21094	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separations	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,,	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
∏ yes	Other Specify Credit Card	Purchases	

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Debto Debto	r 1 Christopher H Forson r 2 Jean A Forson	Case numb	per (if know)	
4.1 7	SYNC/Big Sandys	Last 4 digits of account number 0062		\$1,830.00
	Nonpriority Creditor's Name PO Box 965036 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all the	nat apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreem report as priority claims	nent or divorce that you did not	
	■ No	lacksquare Debts to pension or profit-sharing plans, and $lacksquare$	other similar debts	
	Yes	■ Other. Specify Credit Card Purchase	<u>es </u>	
4.1 8	SYNCB/Amazon	Last 4 digits of account number 6315		\$700.00
	Nonpriority Creditor's Name P.O. Box 965015 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all the	nat apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreem report as priority claims	nent or divorce that you did not	
	■ No	lacksquare Debts to pension or profit-sharing plans, and $lacksquare$	other similar debts	
	Yes	■ Other. Specify Credit Card Purchase	es	
4.1 9	SYNCB/Car Care One	Last 4 digits of account number 9562		\$375.00
	Nonpriority Creditor's Name c/o P.O Box 965036 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all the	nat apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreem report as priority claims	nent or divorce that you did not	
	■ No	lacksquare Debts to pension or profit-sharing plans, and $lacksquare$	other similar debts	
	☐ Yes	Other Specify Credit Card Purchase	9 S	

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2 Jean A Forson	Case number (if know)			
SYNCB/Care Credit	Last 4 digits of account number 0713	\$883		
Nonpriority Creditor's Name PO Box 965036	When was the debt incurred?	Ψ		
Orlando, FL 32896				
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	_			
Debtor 1 only	Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify Credit Card Purchases			
SYNCB/Care Credit	Last 4 digits of account number 5674	\$883		
Nonpriority Creditor's Name PO Box 965036	When was the debt incurred?	·		
Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	no or the date year mo, the damine. Oncok an that apply			
☐ Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims			
■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify Credit Card Purchases			
SYNCB/JC Penney	Last 4 digits of account number 8003	\$435		
Nonpriority Creditor's Name PO Box 965007	When was the debt incurred?			
Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	As of the date you me, the damins. Oneck an that apply			
Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	<u> </u>			
	☐ Disputed Type of NONPRIORITY unsecured claim:			
At least one of the debtors and another	Student loans			
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims			
■ No	Debts to pension or profit-sharing plans, and other similar debts			
☐ Yes	■ Other Specify Credit Card Purchases			
00	- Other, Specify Cross Card and an another Control of the Control			

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Debtor Debtor	1 Christopher H Forson 2 Jean A Forson		Case number (if know)	
4.2	SYNCB/Lowes Nonpriority Creditor's Name	Last 4 digits of account number	6438	\$409.00
	PO Box 965005 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	l Purchases	
4.2	SYNCB/Lowes	Last 4 digits of account number	6477	\$725.00
	Nonpriority Creditor's Name PO Box 965005 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	Purchases-Charge off	
4.2 5	SYNCB/TJ Maxx	Last 4 digits of account number	0755	\$654.00
	Nonpriority Creditor's Name P.O. Box 965005 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	-	,	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	·	
	■ No	Debts to pension or profit-sharir	- '	
	Yes	■ Other. Specify Credit Card	l Purchases	

2 Jean A Forson	Case number (if know)			
Synchrony Bank/Wal-Mart	Last 4 digits of account number 0243	\$600.00		
Nonpriority Creditor's Name	Last 4 digits of account number U243	Ψ000.00		
PO Box 960024	When was the debt incurred?			
Orlando, FL 32896-0024				
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only				
Debtor 2 only	Contingent			
_	Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
☐ Check if this claim is for a community debt				
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
☐ Yes	■ Other Specify Credit Card Purchases			
TD Bank USA/Target Credit	Last 4 digits of account number 3675	\$1,300.00		
Nonpriority Creditor's Name PO Box 673	When was the debt incurred?			
Minneapolis, MN 55440	when was the debt incurred?			
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify Credit Card Purchases			
TD Bank/Target	Last 4 digits of account number 5421	\$195.00		
Nonpriority Creditor's Name	Last 4 digits of account number	ψισσισσ		
3701 Wayzata Blvd	When was the debt incurred?			
Minneapolis, MN 55416-3401	- A control of the standard of			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only				
_	Contingent			
Debtor 2 only	Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	□ Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify Credit Card Purchases			

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Christopher H Forson Debtor 2 Jean A Forson		Case number (if know)			
Name and Address	On which entry in Part 1 or Part 2 o	On which entry in Part 1 or Part 2 did you list the original creditor?			
Fairfield County Municipal Court	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
Clerk of Courts P.O. Box 2390 Lancaster, OH 43130-5390		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Zunicuston, 011 40 100 0000	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?			
First National Credit Card	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
PO Box 5097 Sioux Falls, SD 57117-5097		■ Part 2: Creditors with Nonpriority Unsecured Claims			
3100X 1 alls, 3D 37 117-3037	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?			
Meade & Associates	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
737 Enterprise Dr. Westerville, OH 43081-8850		Part 2: Creditors with Nonpriority Unsecured Claims			
Westerville, 511 45001-0050	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?			
One Main Financial	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
1124 N. Memorial Dr. Lancaster, OH 43130		■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 24,674.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 45,240.97
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 69,914.97

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		I A A A III I I I		
Fill in this infor	mation to identify your	case:		
Debtor 1	Christopher H Fo	rson		
	First Name	Middle Name	Last Name	
Debtor 2	Jean A Forson			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3	Oity		Oldio	Zii Oodc	
0	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				
	Number	Street			_
	City		State	ZIP Code	_

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		Documen	t Page 36 of 7	70		
Fill in this	information to identify your	case:				
Debtor 1	Christopher H Fo					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing	Jean A Forson First Name	Middle Name	Last Name			
	ites Bankruptcy Court for the:					
0						
Case num (if known)	ber	☐ Check if this is an amended filing				
Officia	l Form 106H					
	lule H: Your Cod	ebtors		12/15		
501100	idic III. Todi ood			12/13		
fill it out, a your name		boxes on the left. Attach t . Answer every question.	he Additional Page to th	If more space is needed, copy the Additional Page, is page. On the top of any Additional Pages, write a codebtor.		
-						
■ No □ Yes						
L res						
	hin the last 8 years, have you na, California, Idaho, Louisiana,			(Community property states and territories include on, and Wisconsin.)		
■ No.	Go to line 3.					
☐ Yes	s. Did your spouse, former spou	use, or legal equivalent live v	vith you at the time?			
in line Form	e 2 again as a codebtor only i	f that person is a guaranto	r or cosigner. Make sur	our spouse is filing with you. List the person shown e you have listed the creditor on Schedule D (Official but the Company of		
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:		
3.1				☐ Schedule D. line		
	Name			☐ Schedule E/F, line		
				☐ Schedule G, line		
-	Number Street					
	City	State	ZIP Code			
3.2				☐ Schedule D, line		
	Name			☐ Schedule E/F, line		
				☐ Schedule G, line		
-	Number Street					

State

City

ZIP Code

	t1: Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies.			eer	Debtor 2 or non-filing spouse Employed Not employed Registered Nurse Fairhope Hospice & Palliative Car 282 Sells Rd. Lancaster, OH 43130		
Pa	Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or	Employment status Occupation	Debtor 1 Employed Not employed Locomotive Engine	name and c	Debtor 2 or non-filing spouse Employed Not employed Registered Nurse		
Pa	Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers.	Employment status	Debtor 1 Employed Not employed	name and c	Debtor 2 or non-filing spouse Employed Not employed		
Pa	Fill in your employment information. If you have more than one job, attach a separate page with information about additional		Debtor 1 Employed		Debtor 2 or non-filing spouse Employed		
Pa	Fill in your employment information. If you have more than one job,		Debtor 1		Debtor 2 or non-filing spouse		
Pa	t 1: Describe Employment Fill in your employment		onal pages, write your		ase number (if known). Answer every question		
Be sup	plying correct information. If you use. If you are separated and you	sible. If two married peo	ng jointly, and your spo	use is living	12/ d Debtor 2), both are equally responsible for g with you, include information about your		
<u>O</u>	fficial Form 106I				MM / DD/ YYYY		
					A supplement showing postpetition chapter 13 income as of the following date:		
	nown)		-		☐ An amended filing		
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO Case number					Check if this is:		
(Sp	otor 2 Jean A Fors use, if filing) tod States Rankruptcy Court for the		CT OF OHIO				
D -							
	otor 1 Christophe	r H Forson					

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 8,238.35 \$ 4,067.29

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106I Schedule I: Your Income page 1

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Christopher H Forson Debtor 1 Jean A Forson Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 8.238.35 4.067.29 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 1,857.75 1,190.24 Mandatory contributions for retirement plans 5b. 5b. \$ 0.00 0.00 Voluntary contributions for retirement plans 5c. 5c. \$ 411.92 \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 362.51 0.00 5e. Insurance 5e. \$ 205.25 \$ 0.00 5f. **Domestic support obligations** 5f. \$ 872.58 0.00 5g. Union dues 5g. 116.00 0.00 Railroad job insurance - union backed 76.00 0.00 5h. Other deductions. Specify: BRCF 5h.+ 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 3,902.01 1,190.24 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7 \$ 4,336.34 \$ 2,877.05 List all other income regularly received: Net income from rental property and from operating a business, Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$ 0.00 monthly net income. 8a 0.00 8h Interest and dividends 8h \$ 0.00 \$ 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 **Unemployment compensation** 8d. 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. 8g. Pension or retirement income \$ \$ 0.00 0.00 8h. Other monthly income. Specify: 8h.+ \$ \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 0.00 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 4,336.34 \$ 2.877.05 \$ 7,213.39 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. Specify: 0.00 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 7,213.39 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain: Debtor husband recently decreased his 401K contributions from 10% to 5% as indicated on Schedule I. No other anticipated changes.

Official Form 106I Schedule I: Your Income page 2

	in this informs	ation to identify yo	ur caca:					
						Cha	ala if shi a i a	
Deb	tor 1	Christopher	H Forso	n			ck if this is: An amended filing	
	tor 2 ouse, if filing)	Jean A Forso	on				_	ving postpetition chapter the following date:
Unite	ed States Bank	ruptcy Court for the:	SOUTH	HERN DISTRICT OF OHIO	<u> </u>		MM / DD / YYYY	
	e number nown)							
Of	ficial Fo	rm 106J						
Sc	chedule	J: Your I	Exper	nses				12/1
Be a	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this				
Part		ribe Your House	hold					
1.	Is this a joir							
	_	s Debtor 2 live i	n a senar	ate household?				
	= 100. 2 00		n a copa					
		-	t file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	hold of Deb	tor 2.	
2.	Do you hay	e dependents?	□ No	•	·			
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		8	■ Yes □ No
					Son		12	■ Yes
					5		40	□ No
					Daughter		12	■ Yes □ No
								☐ Yes
3.		penses include		No				
		of people other the d your depender		Yes				
exp	imate your ex	a date after the b	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the	ude expense value of suc icial Form 10	h assistance and	non-cash d have ind	government assistance i cluded it on <i>Schedule I:</i> \	f you know /our Income		Your exp	enses
4.		or home owners		nses for your residence. I or lot.	nclude first mortgage	4. \$	§	0.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a. \$	5	0.00
		erty, homeowner's	s, or renter	's insurance		4b. \$	·	0.00
			•	upkeep expenses		4c. \$		100.00
5.		eowner's associati		dominium dues our residence, such as ho	me equity loops	4d. § 5. §	· -	0.00
J.	Auditional	mortgage payme	ins for yo	our residence, such as no	me equity loans	J. 1	P	0.00

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	istopher H Forson			
btor 2 Jea	n A Forson	Case num	ber (if known)	
Utilities:				
	tricity, heat, natural gas	6a.	\$	300.00
	er, sewer, garbage collection	6b.	\$	75.00
	phone, cell phone, Internet, satellite, and cable services	6c.	\$	325.00
6d. Othe	r. Specify: Trash pick-up	6d.	\$	40.00
	housekeeping supplies		\$	930.00
	and children's education costs	8.	\$	0.00
Clothing, I	aundry, and dry cleaning	9.	\$	210.00
•	eare products and services	10.	\$	210.00
Medical ar	nd dental expenses	11.	\$	300.00
Transport	ation. Include gas, maintenance, bus or train fare.			
Do not incl	ude car payments.	12.	\$	550.00
Entertainn	nent, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
Charitable	contributions and religious donations	14.	\$	0.00
Insurance				
	ude insurance deducted from your pay or included in lines 4 or 20.	45-	Φ.	2.22
15a. Life		15a.	·	0.00
	th insurance	15b.	· :	0.00
	cle insurance	15c.	· -	350.68
	er insurance. Specify:	15d.	\$	0.00
Specify:	not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	t or lease payments:		•	
	payments for Vehicle 1	17a.	· <u> </u>	0.00
	payments for Vehicle 2	17b.	·	0.00
17c. Othe		17c.	*	0.00
17d. Othe	if. Specify:	17d.	\$	0.00
	from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
	ments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	property expenses not included in lines 4 or 5 of this form or on Sche			
20a. Mort	gages on other property	20a.	· ·	0.00
	estate taxes	20b.	\$	0.00
20c. Prop	erty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Mair	tenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Hom	eowner's association or condominium dues	20e.	\$	0.00
Other: Spe	ecify: After-school activities/extra-curricular	21.	+\$	100.00
Pet-food/	medication		+\$	50.00
Calculate	your monthly expenses			
22a. Add li	nes 4 through 21.		\$	3,690.68
22b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add lii	ne 22a and 22b. The result is your monthly expenses.		\$	3,690.68
Calculate	your monthly net income.			-
	/ line 12 (your combined monthly income) from Schedule I.	23a.	\$	7,213.39
	your monthly expenses from line 22c above.	23b.	-\$	3,690.68
	ract your monthly expenses from your monthly income.	23c.	\$	3,522.71
The	result is your monthly net income.	230.		0,022.11
For example	pect an increase or decrease in your expenses within the year after yo, do you expect to finish paying for your car loan within the year or do you expect your to the terms of your mortgage?			se or decrease because o
■ No.				
ПУес	Explain here:			

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Christopher H Fo			
	First Name	Middle Name	Last Name	
Debtor 2	Jean A Forson First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing
ou must file th	is form whenever you fi	ile bankruptcy schedules n connection with a bank		rmation. a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20
Sig	gn Below			
Did you pa	ay or agree to pay some	one who is NOT an attori	ney to help you fill out bankrupt	cy forms?
■ No				
☐ Yes.	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	nary and schedules filed with th	is declaration and
X /s/ Ch	ristopher H Forson		X /s/ Jean A Forson	
Christ	topher H Forson		Jean A Forson	
Signatu	ure of Debtor 1		Signature of Debtor 2	
Date	March 24, 2016		Date March 24, 2	016

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Fill in	this inform	nation to identify you	, case.			
Debto		Christopher H F				
Debio		First Name	Middle Name	Last Name		
Debto		Jean A Forson	Middle News	Leat News		
	e if, filing)	First Name	Middle Name	Last Name		
United	l States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT (OF OHIO		
Case (if know)	number _				_	Check if this is an mended filing
Stat	ement	nd accurate as possi	ble. If two married people a		ankruptcy equally responsible for sup	
numbe	er (if knowi	n). Answer every ques		unis formi. On the top of an	y additional pages, write you	ar name and case
Part 1	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. W	hat is you	current marital statu	is?			
	Married Not mar	ried				
2. D	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. Lis	t all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	<i>ı</i> .	
C	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ity property state or territor, ico, Texas, Washington and V	
	No Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
Fi	II in the tota	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including part e together, list it only once ur		ndar years?
] No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$26,078.61	■ Wages, commissions, bonuses, tips	\$9,643.39
			☐ Operating a business		☐ Operating a business	

Official Form 107

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	ristopher H Forson In A Forson		Cas	e number (if known)	
		Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
For last calend (January 1 to I	dar year: December 31, 2015)	■ Wages, commissions, bonuses, tips	\$107,295.00	■ Wages, commissions bonuses, tips	, \$41,060.00
		☐ Operating a business		☐ Operating a business	
	ar year before that: December 31, 2014)	■ Wages, commissions, bonuses, tips	\$126,353.00	■ Wages, commissions bonuses, tips	\$47,939.00
		☐ Operating a business		☐ Operating a business	
□ No	Fill in the details.	ome from each source separa	ely. Do not include income t		
- 165.1	iii iii tile details.	Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
		Describe below	(before deductions and exclusions)	Describe below.	(before deductions and exclusions)
For last calend (January 1 to I	dar year: December 31, 2015)	Retirement Income	\$1,229.00		
Part 3: List	Certain Payments You	ı Made Before You Filed for ∣	Bankruptcy		
☐ No.	Neither Debtor 1 nor I	e's debts primarily consumer Debtor 2 has primarily consumants a personal, family, or househol	imer debts. Consumer debt	s are defined in 11 U.S.C. §	101(8) as "incurred by an
	During the 90 days before	ore you filed for bankruptcy, di	d you pay any creditor a tota	Il of \$6,225* or more?	
	□ No. Go to line 7	7.			
	paid that cr not include	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the	its for domestic support obliquis bankruptcy case.	gations, such as child suppo	ort and alimony. Also, do
_		t on 4/01/16 and every 3 years		or after the date of adjustm	ent.
■ Yes.		or both have primarily consu ore you filed for bankruptcy, di		l of \$600 or more?	
	■ No. Go to line 7	7.			
	include pay	each creditor to whom you pai /ments for domestic support o r this bankruptcy case.			
Creditor's	Name and Address	Dates of payme	nt Total amount	Amount you Was th	is payment for

Del	otor 2 Jean A Forson		Cas	e number (if known)		
7.	<i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in	cy, did you make a payment on a debt you owed anyone who was an insider? Intners; relatives of any general partners; partnerships of which you are a general partner; corpora control, or owner of 20% or more of their voting securities; and any managing agent, including or 1 U.S.C. § 101. Include payments for domestic support obligations, such as child support and				Il partner; corporations gent, including one fo
	No☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		yments or transfer a	nny property on a	eccount of a de	ebt that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Par	tt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures	,			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
	Huntington National Bank vs. Jean Faught aka Jean Forson 2016 CV 0022	Foreclosure	Hocking Count Common Pleas 1 East Main St. Logan, OH 431	5	■ Pending □ On appe □ Conclude	
	Nationstar Mortgage vs. Chris Forson 16 CV 00122	Foreclosure	Fairfield Count Common Pleas 224 E. Main St. P.O. Box 370 - Courts Lancaster, OH	Clerk of	Pending On appe Conclude	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	l, seized, or levied?
	Creditor Name and Address	Describe the Property Explain what happene	d	Date		Value of the property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.		cluding a bank or fir	nancial institution	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date taker	action was	Amount

Debtor 1

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Debt Debt		Christopher H Forson Jean A Forson	_	Case numb	er (if known)	
(opointed receiver, a custodian, o		ns any of your property in the possession of a r official?	n assignee for the bene	fit of creditors, a
Part	5: Li	ist Certain Gifts and Contribution	ıs			
	■ No □ Yes Gifts w per per	s. Fill in the details for each gift. rith a total value of more than \$60	00	id you give any gifts with a total value of mor	e than \$600 per person? Dates you gave the gifts	Value
	Addres					
ļ	■ No □ Yes Gifts o more to Charity	s. Fill in the details for each gift or c r contributions to charities that t han \$600 's Name	contribution	id you give any gifts or contributions with a toon. Describe what you contributed	Dates you contributed	\$600 to any charity Value
Part		SS (Number, Street, City, State and ZIP Code ist Certain Losses	e)			
	or gaml ■ No □ Ye	oling? s. Fill in the details.		since you filed for bankruptcy, did you lose a		
		be the property you lost and e loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Part	7: Li	ist Certain Payments or Transfers	s			
(consult Include	ed about seeking bankruptcy or partition	preparin	d you or anyone else acting on your behalf pa g a bankruptcy petition? s, or credit counseling agencies for services requ		ty to anyone you
	Addres	n Who Was Paid ss or website address n Who Made the Payment, if Not Y	′ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Wendi 6649 N Suite Worth	i A. Henderhan, Attorney at La N. High St.		Attorney Fees	3/16/16	\$800.00
-		r CC ummit Ave. / City, NJ 07302		pre-credit counseling	3/4/16	\$14.95

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Debtor 1 Christopher H Forson
Debtor 2 Jean A Forson

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, opromised to help you deal with your creditors. Do not include any payment or transfer that you list. No Yes, Fill in the details.	or to make payments			transfer any prope	rty to anyone who
	☐ Yes. Fill in the details. Person Who Was Paid Address	Description and value of any property transferred			Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already li No Yes. Fill in the details.	iness or financial affai e as security (such as th	rs?			
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			ny property or received or debts hange	Date transfer was made
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No □ Yes. Fill in the details.		property to a se	lf-settled trus	st or similar device o	of which you are a
	Name of trust	Description and va	lue of the proper	rty transferre	d	Date Transfer was made
Par	List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stora	age Units		
20.	Within 1 year before you filed for bankruptcy, visold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, associated No Yes. Fill in the details.	other financial accoun	s; certificates of			
		ast 4 digits of ccount number	Type of account instrument	clos	e account was sed, sold, ved, or sferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables? No	ar before you filed for I	oankruptcy, any s	safe deposit	box or other deposi	tory for securities,
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str State and ZIP Code)		escribe the c	ontents	Do you still have it?
22.	Have you stored property in a storage unit or p ■ No	place other than your l	nome within 1 ye	ar before you	ı filed for bankrupto	у
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, Strate and ZIP Code)		escribe the c	ontents	Do you still have it?

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Debtor 1 Christopher H Forson Debtor 2 Jean A Forson

Case number (if known)

Par	t 9: Identify Property You Hold or Control for	Someone Else								
23.	3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.									
	No	■ No								
	Yes. Fill in the details.	NATI	D " "							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value						
Par	t 10: Give Details About Environmental Inform	ation								
For	the purpose of Part 10, the following definitions	apply:								
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.									
_	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate,	or utilize it or used						
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,						
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of wher	they occurred.							
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?						
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any	release of hazardous material?								
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.									
	■ No									
	☐ Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case						
Par	t 11: Give Details About Your Business or Con	nections to Any Business								
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have an	y of the following connections to an	v business?						
	☐ A sole proprietor or self-employed in a	•		y buomicoo .						
	☐ A member of a limited liability company		·							
	☐ A partner in a partnership	.,	F X = 17							
	☐ An officer, director, or managing execut	tive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation									

Filed 03/24/16 Entered 03/24/16 19:34:27 Desc Main Case 2:16-bk-51913 Doc 1 Page 48 of 70 Document **Christopher H Forson** Debtor 1 Debtor 2 Jean A Forson Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jean A Forson /s/ Christopher H Forson **Christopher H Forson** Jean A Forson Signature of Debtor 1 Signature of Debtor 2 Date March 24, 2016 Date March 24, 2016

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). ☐ Yes. Name of Person

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LBR Form 2016-1(b)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re:		Case No.
Christopher H Forson		
Jean A Forson		Chapter 13
	Debtor(s)	Judge

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

I. Dicelector

1.	Disclosure							
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am that compensation paid to me within one year before the filing of the petition is services rendered or to be rendered on behalf of the debtor(s) in contemplation of follows:	in bankrupt	cy, or agreed to be paid to me, for					
	For legal services, I have agreed to accept	\$	3,500.00					
	Prior to the filing of this statement I have received	\$	800.00					
	Balance Due	\$	2,700.00					
 3. 	\$310.00 of the filing fee has been paid. The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
4.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
5.	■ I have not agreed to share the above-disclosed compensation with any other per associates of my law firm.	■ I have not agreed to share the above-disclosed compensation with any other persons unless they are members and/or associates of my law firm.						
	☐ I have agreed to share the above-disclosed compensation with another person of my law firm. A copy of the agreement, together with a list of the names of attached.							

II. **Application**

- I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,500, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,500, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the hourly rate at which the services were performed, and the actual time spent by the case attorney, any other attorney, paralegal or professional person for whom fees are sought. Any request for reimbursement of expenses shall include an itemization of the expenses.
 - Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what a. chapter, to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and amendments thereto that may be required; b.
 - Preparation and filing of chapter 13 plan, and any pre-confirmation amendments thereto that may be required; c.
 - d. Preparation and filing of payroll orders and amended payroll orders;
 - Representation of the debtor at the meeting of creditors and confirmation hearing; and any continued hearings thereof; e.
 - Filing of address changes; f.
 - Routine phone calls and questions; g.
 - Review of claims; h.

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- i. Review of notice of intention to pay claims;
- j. Preparation and filing of objections to non-real estate and non-tax claims;
- k. Preparation and filing of first motion to suspend or reduce payments;
- 1. Preparation and filing of debtor's certification regarding issuance of discharge order; and
- m. Any other duty as required by local decision or policy.

Exemption planning; preparation and filing of reaffirmation agreements and applications as needed.

7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

March 24, 2016	/s/ Wendi Henderhan
Date	Wendi Henderhan
	Signature of Attorney
	0078734
	Wendi A. Henderhan, Attorney at Law
	6649 N. High St.
	Suite 106
	Worthington, OH 43085
	614-738-9695

WHenderhanLaw@Gmail.com

Fill in this information to identify your case:						
Christopher H Forson						
Jean A Forson						
Sankruptcy Court for the: Southern District of Ohio						

Check	Check as directed in lines 17 and 21:							
l .	According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	 Disposable income is determined under 11 U.S.C. § 1325(b)(3). 							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 8,840.56 4,067.29 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 0.00 Copy here -> \$ 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Jean A Forson Debtor 2 Case number (if known) Column B Column A Debtor 2 or Debtor 1 non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you____ For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the 0.00 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 4.067.29 8.840.56 12,907.85 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 12,907.85 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 Copy here=> 12,907.85 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 12.907.85 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 154,894.20 15b. The result is your current monthly income for the year for this part of the form.

Christopher H Forson

Debtor 1

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Debtor Debtor			topher H Forson A Forson		Case number (if known)		
16.	Calc	ulate t	he median family income that applies to yo	ou. Follow these step	s:		
	16a.	Fill in t	he state in which you live.	ОН			
	16h	Fill in t	he number of people in your household.	5			
			he median family income for your state and si			\$	86,989.00
		To find	l a list of applicable median income amounts, tions for this form. This list may also be availa	go online using the I		Ψ_	<u> </u>
17.	How		e lines compare?				
	17a.		Line 15b is less than or equal to line 16c. Or 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO				
	17b.	•	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcul your current monthly income from line 14 ab	ation of Your Dispo			
Part :	3:	Calc	ulate Your Commitment Period Under 11 U	J.S.C. § 1325(b)(4)			
18.	Сор	y your	total average monthly income from line 11			\$	12,907.85
	conte	end tha	marital adjustment if it applies. If you are r t calculating the commitment period under 11 come, copy the amount from line 13.				
	•		narital adjustment does not apply, fill in 0 on li	ine 19a.		-\$	0.00
	19b.	Subtra	act line 19a from line 18.			\$	12,907.85
20.	Calc	ulate y	our current monthly income for the year.	Follow these steps:			
:	20a.	Сору І	ine 19b			\$_	12,907.85
		Multipl	y by 12 (the number of months in a year).				x 12
:	20b.	The re	sult is your current monthly income for the year	ar for this part of the	form	\$_	154,894.20
:	20c.	Copy t	he median family income for your state and s	ize of household fron	n line 16c	\$_	86,989.00
2	21.	How d	o the lines compare?				
			ine 20b is less than line 20c. Unless otherwise eriod is 3 years. Go to Part 4.	e ordered by the cou	t, on the top of page 1 of this form, c	heck box 3,	The commitment
			ine 20b is more than or equal to line 20c. Unlo	ess otherwise ordere	d by the court, on the top of page 1 o	of this form, c	check box 4, The
Part 4	4:	Sign	Below				
	By si	igning h	nere, under penalty of perjury I declare that th	e information on this	statement and in any attachments is	true and co	rrect.
Y	/s/	Christ	topher H Forson	Y /	s/ Jean A Forson		
^	Ch	ristop	her H Forson	J	ean A Forson		
	·		of Debtor 1		signature of Debtor 2		
	Date		ch 24, 2016 DD / YYYY	С	March 24, 2016 MM / DD / YYYY		
	lf voi		sed 17a, do NOT fill out or file Form 122C-2.		1VIIVI / DD / 1111		
	•		ted 17b, fill out Form 122C-2 and file it with th	is form. On line 39 of	that form, copy your current monthly	/ income fror	n line 14 above.

Christopher H Forson

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Fill in	his information to identify you	r case:			
Debtor	Christopher H Forso	on	-		
Debtor (Spous	2 Jean A Forson e, if filing)		-		
United	States Bankruptcy Court for the:	Southern District of Ohio	-		
Case r (if knov			□ Check	if this is an amended	d filing
	Form 122C-2 pter 13 Calculatio	n of Your Disposable	Income		12/1
	ut this form, you will need your tment Period (Official Form 122	completed copy of <i>Chapter 13 States</i> C-1).	ment of Your Current Monthly	income and Calculation	on of
space i	omplete and accurate as possil s needed, attach a separate she nal pages, write your name and	ole. If two married people are filing to tet to this form, Include the line numb case number (if known).	gether, both are equally respo er to which additional informa	onsible for being accur ation applies. On the to	ate. If more op any
Part 1:	Calculate Your Deductions	from Your Income			
the		issues National and Local Standards the IRS standards, go online using th t the bankruptcy clerk's office.			
expe	enses if they are higher than the st	n lines 6-15 regardless of your actual extandards. Do not include any operating onts that you subtracted from your spous	expenses that you subtracted from	om income in lines 5 and	
If yo	ur expenses differ from month to r	month, enter the average expense.			
Note	: Line numbers 1-4 are not used i	n this form. These numbers apply to info	ormation required by a similar fo	rm used in chapter 7 ca	ses.
5.	The number of people used in	determining your deductions from in-	come		
		could be claimed as exemptions on you I dependents whom you support. This n sehold.		5	
Nati	onal Standards You mu	ist use the IRS National Standards to ar	nswer the questions in lines 6-7.		
6.		s: Using the number of people you entended to the state of the state o	red in line 5 and the IRS Nationa	s	1,891.00
7.	the dollar amount for out-of-pock	vance: Using the number of people you et health care. The number of people is suse older people have a higher IRS allo	split into two categoriespeople	who are under 65 and	

Official Form 22C-2

higher than this IRS amount, you may deduct the additional amount on line 22.

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Christopher H Forson Debtor 1 Jean A Forson Case number (if known) Debtor 2 People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 5 7c. Subtotal. Multiply line 7a by line 7b. 300.00 Copy here=> \$ 300.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 144 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. Copy here=> \$ 0.00 300.00 300.00 7g. **Total.** Add line 7c and line 7f Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 610.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,385.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Nationstar Mortgage** 939.43 Сору Repeat this amount 939.43 939.43 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 445.57 445.57 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects 0.00 the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

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Debtor 1 Jean A Forson Debtor 2 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 424.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Describe Vehicle 1: 2010 Honda Civic 48,000 miles Location: 304 Lincoln Avenue, Vehicle 1 Pleasantville OH 43148 13a. Ownership or leasing costs using IRS Local Standard..... 517.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

	Name of each creditor for Vehicle 1	Averag paymei	e monthly nt				
	Honda Financial Services	\$	82.80				
	Total Average Monthly Payment	\$	82.80	Copy here =>	-\$82	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense			,		Copy net	
	Subtract line 13b from line 13a. if this number is less than \$0	, enter \$0	l	\$	434.20	Vehicle 1 expense here => \$	434.20
Vel	Describe Vehicle 2: 2006 Dodge Ram 170,0 Avenue, Pleasantville			04 Linco	In	_	
13d.	Ownership or leasing costs using IRS Local Standard			\$	517.00		
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not ir	nclude costs for				
	Name of each creditor for Vehicle 2	Averag payme	e monthly nt				
	Wells Fargo Dealer Services	\$\$	422.46				
	Total Average Monthly Payment	\$	422.46	Copy here => -\$	422.4	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense					Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0	J	\$	94.54	Vehicle 2 expense here => \$	94.54
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of					n the \$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in word claim more than the IRS Local Standard for <i>Public Trans</i>	vhat you b	elieve is the ap				0.00

Christopher H Forson

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Debtor 1 Debtor 2 Christopher H Forson

Jean A Forson

Case number (if known)

Oth		n addition to the expense de he following IRS categories		s listed above,	you are allowed your monthly expenses	s for	
16.	Taxes: The total monthly am self-employment taxes, social your pay for these taxes. How and subtract that number from Do not include real estate, sa	\$	3,183.81				
17.	Involuntary deductions: Th		ctions th	at your job red	uires, such as retirement		
	contributions, union dues, an Do not include amounts that		, such as	s voluntary 40°	I(k) contributions or payroll savings.	\$	116.00
18.	Life Insurance: The total mo filing together, include payme Do not include premiums for of life insurance other than te	\$	0.00				
19.	Court-ordered payments: T administrative agency, such a	as spousal or child support	payment	S.		\$	872.58
20	Education: The total monthly				ou will list these obligations in line 35.	Ψ	
20.	as a condition for your job	, , ,	aucation	triat is citrici i	equileu.		
			child if n	o public educa	ation is available for similar services.	\$	0.00
21.	Childcare: The total monthly Do not include payments for			•	itting, daycare, nursery, and preschool.	\$	0.00
22.	Additional health care expethat is required for the health by a health savings account.	\$	0.00				
00	Payments for health insurance	· ·		•	ou pay for telecommunication services	Ψ	
25.	for you and your dependents phone service, to the extent r income, if it is not reimbursed Do not include payments for	+\$	0.00				
24	Add all of the expenses allo			•	ount you previously deducted.	\[\s\ \]	8,371.70
۷٦.	Add lines 6 through 23.	owed under the into exper	isc anov	vances.		Ľ	
Add	litional Expense Deductions	These are additional de Note: Do not include ar					
25.					ses. The monthly expenses for health y necessary for yourself, your spouse, c	or	
	Health insurance		\$	205.25			
	Disability insurance		\$	0.00			
	Health savings account	+	\$	0.00			
	Total		\$	205.25	Copy total here=>	\$	205.25
	Do you actually spend this to No. How much do you				ı		
	Yes		\$				
26.	continue to pay for the reason	nable and necessary care a f your immediate family who	ind suppo is unab	ort of an elderl le to pay for su	actual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.					nses that you incur to maintain the es Act or other federal laws that apply.		
	By law, the court must keep t	\$	0.00				

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Debtor 1 Debtor 2	Christopher H Forson Jean A Forson	Cas	se number (<i>if known</i>)		
	Additional home energy costs. Your home allowance on line 8.	energy costs are included in your non-morte	gage housing and utilities		
	If you believe that you have home energy co 8, then fill in the excess amount of home energy		ts included in expenses on line	е	
	You must give your case trustee documental amount claimed is reasonable and necessar		show that the additional	\$	0.00
	Education expenses for dependent childr \$156.25* per child) that you pay for your depublic elementary or secondary school.				
	You must give your case trustee documental claimed is reasonable and necessary and no		explain why the amount		
	* Subject to adjustment on 4/01/16, and ever	y 3 years after that for cases begun on or af	ter the date of adjustment.	\$	0.00
	Additional food and clothing expense. The higher than the combined food and clothing at than 5% of the food and clothing allowances	allowances in the IRS National Standards. T			
	To find a chart showing the maximum addition instructions for this form. This chart may also				
	You must show that the additional amount cl	aimed is reasonable and necessary.		\$	0.00
	Continuing charitable contributions. The a instruments to a religious or charitable organ		n the form of cash or financial		
	Do not include any amount more than 15% of	f your gross monthly income.		\$	0.00
	Add all of the additional expense deduction Add lines 25 through 31.	ons		\$	205.25
Dedu	uctions for Debt Payment				
	For debts that are secured by an interest in pans, and other secured debt, fill in lines		mortgages, vehicle		
	o calculate the total average monthly payme reditor in the 60 months after you file for ban		e to each secured		
	Mortgages on your home			Average	monthly
33a.	Copy line 9b here		=>	\$	939.43
	Loans on your first two vehicles				
33b.	Copy line 13b here		=>	\$	82.80
33c.				\$	422.46
33d.	List other secured debts:				
	e of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?		
			□ No		
	-NONE-		☐ Yes	\$	
				Ψ	
			□ No		
			☐ Yes	\$	
			□ No		
			☐ Yes +	\$	
33e	Total average monthly payment. Add lines	33a through 33d	\$ 1,444.69 Copy total here:		1,444.69

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Debtor 1 Debtor 2		stopher H Forson n A Forson			Case	number (if known)			
			ine 33 secured by your prima						
	□ No.	Go to line 35.							
1	Yes.	listed in line 33, to keep p	ou must pay to a creditor, in ado cossession of your property (ca in the information below.	•	•				
Naı	me of the	creditor	Identify property that secure	es the debt	•	Total cure amount		onthly o	cure
Но	nda Fi	nancial Services	2010 Honda Civic 48,0 Location: 304 Lincoln Pleasantville OH 4314	Avenue,	\$	780.00	÷ 60 = \$		13.00
Na	tionsta	r Mortgage	304 Lincoln Avenue P 43148 Fairfield Count 2 parcels lot 68 and 6 total	ty		9,551.00	÷ 60 = \$ ÷ 60 = +\$		159.18
					Total	\$ 172.18	Copy	. \$	172.18
			all of these priority claims. Do uch as those you listed in line due priority claims		4	0.00	÷ 60	\$	0.00
36. I	Projecte	d monthly Chapter 13 pla					_		
(t -	Office of the Exec To find a l	the United States Courts (utive Office for United Stat ist of district multipliers that inc	s stated on the list issued by th for districts in Alabama and No es Trustees (for all other districtludes your district, go online using ist may also be available at the bar	orth Carolina) cocts). the link specified	or by X d in the	ζ			
,	Average	monthly administrative exp	pense			\$	here=>		
37.		of the deductions for de es 33e through 36.	bt payment.					\$	1,616.87
Tota	al Deduc	tions from Income							
38.	Add all d	of the allowed deductions	S.						
		ne 24, All of the expenses a e allowances	allowed under IRS	\$	8,371.70				
	Copy lir	ne 32, All of the additional		\$	205.25				
	Copy lir	ne 37, All of the deductions	s for debt payment	+\$	1,616.87	· 			
	Total de	eductions		\$1	0,193.82	Copy total here=	>	\$	10,193.82

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	ristopher H In A Forsor				ase nun	nber (<i>if known</i>)		
1 2: De	etermine You	ur Disposable Income Under 11	U.S.C. § 1325	(b)(2)				
		rent monthly income from line Current Monthly Income and Ca			d.		\$	12,907.85
childrei disability received	 The month payments for d in accordan 	bly necessary income you recei- nly average of any child support pa or a dependent child, reported in nee with applicable nonbankruptcy ended for such child.	ayments, foster Part I of Form 1	care payments, or 22C-1, that you	9	8	0.00	
employe in 11 U.	er withheld fro S.C. § 541(b)	etirement deductions. The monton wages as contributions for qual(7) plus all required repayments (2. § 362(b)(19).	alified retiremer	nt plans, as specifie	ed (S	0.00	
2. Total of	all deduction	ons allowed under 11 U.S.C. § 7	07(b)(2)(A). Co	py line 38 here	=> \$	10,19	3.82	
expense their exp	es and you ha penses. You	ial circumstances. If special circ ave no reasonable alternative, de must give your case trustee a det locumentation for the expenses.	scribe the spec	ial circumstances a	and			
escribe th	ne special ci	rcumstances		Amount of ex	pense			
				\$		_		
				\$		_		
				\$		_		
			Total \$	0.00		opy ere=> \$	0.00	
4. Total ad	djustments.	Add lines 40 through 43.		=>	\$	10,193.82	Copy here=> -\$	10,193.82
5. Calcula	ite your mon	nthly disposable income under	§ 1325(b)(2) . S	ubtract line 44 from	n line 3	39.	\$	2,714.03
3: CI	hange in Inc	ome or Expenses						
have ch time you you filed	anged or are ur case will be d your petitior	or expenses. If the income in Fore virtually certain to change after the open, fill in the information below, check 122C-1 in the first column in when the increase occurred, and	ne date you file w. For example n, enter line 2 i	d your bankruptcy , if the wages repo n the second colum	petition rted in nn, exp	n and during the creased after		
orm	Line	Reason for change		Date of chang	ge	Increase or decrease?	Amount of cl	nange
] 122C-1] 122C-2						☐ Increase☐ Decrease	\$	
] _{122C-1}] _{122C-2}						☐ Increase☐ Decrease	\$	
122C-2 122C-1						☐ Decrease	Ψ	
							\$	
						☐ Decrease	Ψ	
122C-2 122C-1 122C-2						☐ Increase ☐ Decrease ☐ Decrease	\$	

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Debtor 1 Debtor 2	Christopher H Forson Jean A Forson	Case number (if known)	=
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you decl	re that the information on this statement and in any attachments is true and correct.	
X	/s/ Christopher H Forson Christopher H Forson Signature of Debtor 1	Jean A Forson Signature of Debtor 2	_
Date	March 24, 2016 MM / DD / YYYY	Date March 24, 2016 MM / DD / YYYY	

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Debtor 1 Christopher H Forson

Debtor 2 Jean A Forson Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 09/01/2015 to 02/29/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **CSX** Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$91,642.19 from check dated 8/31/2015. Ending Year-to-Date Income: \$122,088.64 from check dated 12/31/2015.

This Year:

Current Year-to-Date Income: \$22,596.92 from check dated 2/29/2016.

Income for six-month period (Current+(Ending-Starting)): \$53,043.37.

Average Monthly Income: **\$8,840.56**

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Debtor 1 Christopher H Forson

Debtor 2 Jean A Forson Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 09/01/2015 to 02/29/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Fairhope Hospice

Income by Month:

6 Months Ago:	09/2015	\$4,005.53
5 Months Ago:	10/2015	\$3,211.54
4 Months Ago:	11/2015	\$3,747.43
3 Months Ago:	12/2015	\$5,069.61
2 Months Ago:	01/2016	\$5,501.90
Last Month:	02/2016	\$2,867.73
	Average per month:	\$4,067.29

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	5	filing fee	_
\$75	5	administrative fee	
+ \$1	5	trustee surcharge	
\$33	5	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 195 125 S West Street Wilmington, DE 19801

BMI Federal Credit Union 6165 Emerald Parkway P.O. Box 3670 Dublin, OH 43016

Capital Endocrinology 4882 E Main St #210 Columbus, OH 43213

Capital One P O Box 30281 Salt Lake City, UT 84130

Capital One PO Box 30285 Salt Lake City, UT 84130-0285

Capital One PO Box 30253 Salt Lake City, UT 84130

Comenity Bank/ElderBeerman 3100 Easton Square Place Columbus, OH 43219

Credit One Bank
P.O. Box 98873
Las Vegas, NV 89193-8872

Fairfield County Court of Common Pleas 224 E. Main St. P.O. Box 370 - Clerk of Courts Lancaster, OH 43130

Fairfield County Municipal Court Clerk of Courts P.O. Box 2390 Lancaster, OH 43130-5390

Fairfield Insulation & Drywall 1655 Election House Rd Lancaster, OH 43130

First National Bank 500 E. 60th Street N Sioux Falls, SD 57104

First National Credit Card PO Box 5097 Sioux Falls, SD 57117-5097

GM Financial P.O. Box 183834 Arlington, TX 76096-3834

Great Lakes Higher Education PO Box 7860 Madison, WI 53707

Hocking County Court of Common Pleas 1 East Main St. Logan, OH 43138

Hocking County Treasurer P.O. Box 28 Logan, OH 43138

Honda Financial Services P.O. Box 5308 Elgin, IL 60121-5308

Huntington National Bank P.O. Box 1558 Columbus, OH 43216

Huntington National Bank 2361 Morse Rd. Columbus, OH 43229

Kohl's
P.O. Box 3115
Milwaukee, WI 53201-3115

Lerner, Sampson & Rothfuss P.O. Box 5480 Cincinnati, OH 45201-5480

Meade & Associates 737 Enterprise Dr. Westerville, OH 43081-8850

Nationstar Mortgage P.O. Box 829009 Dallas, TX 75382-9009

One Main Financial 1124 N. Memorial Dr. Lancaster, OH 43130

Onemain 6801 Colwell Blvd Irving, TX 75039

PayPal Credit P O Box 5138 Lutherville Timonium, MD 21094 Reimer, Arnovitz, Chernek & Jeffery LPA P.O. Box 39696 30455 Solon Rd. Solon, OH 44139

SYNC/Big Sandys PO Box 965036 Orlando, FL 32896

SYNCB/Amazon P.O. Box 965015 Orlando, FL 32896

SYNCB/Car Care One c/o P.O Box 965036 Orlando, FL 32896

SYNCB/Care Credit PO Box 965036 Orlando, FL 32896

SYNCB/JC Penney PO Box 965007 Orlando, FL 32896

SYNCB/Lowes PO Box 965005 Orlando, FL 32896

SYNCB/TJ Maxx P.O. Box 965005 Orlando, FL 32896

Synchrony Bank/Wal-Mart PO Box 960024 Orlando, FL 32896-0024

TD Bank USA/Target Credit PO Box 673 Minneapolis, MN 55440

TD Bank/Target 3701 Wayzata Blvd Minneapolis, MN 55416-3401

Wells Fargo Dealer Services P.O. Box 25341 Santa Ana, CA 92799